Public Housing Notice: 2007-01

Memorandum

To: All Local Housing Authority Executive Directors, All Non-Profit Housing Agencies administering Massachusetts Rental Voucher Programs

From: Carole E. Collins, Director, Bureau of Housing Management

Subject: Wage Match for State Housing Program Tenants

Date: January 24, 2007

On June 29, 2004 we issued Public Housing Notice 2004-05, which announced the availability of a web based system for conducting a Wage Match for state housing program tenants, including tenants in conventional housing, MRVP and AHVP, to local housing authorities (LHAs). All Massachusetts housing authorities and non-profit agencies that administer state-funded housing programs must participate in this Wage Match program. The pertinent law and regulations can be found at M.G.L. c. 62E, M.G.L. c. 66A, 760 CMR 6.00 and 801 CMR 3.00.

As part of an Interdepartmental Service Agreement (ISA) between the Massachusetts Department of Revenue (DOR) and the Massachusetts Department of Housing and Community Development (DHCD), DHCD is authorized to receive wage reporting information from DOR pursuant to M.G.L. c. 62E, ? 3. The wage match system information is exchanged via the statewide network. LHAs will transmit data via the internet Wage Match System, which is accessed through the housing authority DHCD Housing Applications web page. We will then transmit the data to DOR. DOR will then match the data against its wage reporting files, provide information to DHCD, and in turn DHCD will forward the information to the applicable LHA. We anticipate that responses will be received back at an LHA within five days. LHAs will review the wage reporting information to determine whether income reported by tenants for determining rent is correct.

We are required, on a periodic basis, to provide information about the wage match system. Further, we must ensure that LHAs and Non-Profits are informed of the confidentiality requirements and penalties for non-compliance.

#### For Whom is Wage Match Conducted and Notification Process

LHAs shall conduct a wage match for every adult member (aged 18 and over) of the tenant household residing in state housing programs. Tenants must be informed about the wage match program and must authorize the use of their Social Security numbers for the program. Tenants are required by the lease to provide their social security number, and to authorize use of their social security number by the housing authority for verification of income and assets through DORs wage reporting system. However, there is no requirement that applicants or tenants have a social security number to be eligible or housed.

Please send the attached letter and authorization form to all households. The letter explains the program and asks adult tenants to furnish their Social Security numbers. You must personalize this letter before sending it. The letter should be placed on housing authority letterhead. Also, the name of the authority, the due date, and the return address must be added to the authorization form. You must retain these authorization forms.

### **Confidentiality and Controls**

Because LHAs and Non-Profits, through this system, have access to ?personal data? as defined by M.G.L. c. 66A, LHAs and Non-Profits must ensure the confidentiality of information requested and received through the wage match system. As such, LHAs are subject to and must comply with all applicable laws and regulations relating to confidentiality and privacy, including but not limited to M.G.L. c. 62E, M.G. L. c. 66A, 760 CMR 4.00 and 801 CMR 3.00. The Executive Director is responsible for ensuring the security and confidentiality of the wage reporting information entrusted to his or her LHA or Non-Profit and to ensure that all employees who have access to wage reporting information understand the severe penalties associated with any misuse of this information. Wage reporting information may only be accessed or viewed by an authorized employee of your LHA or Non-Profit and must directly relate to his or her assigned case. No other employee or person under your LHAs or on-Profit's control, or on your premises, may inspect, disclose or browse the wage reporting information for any purpose.

Any unauthorized disclosure of wage reporting information will result in the immediate termination of your LHAs or Non-Profit's authorization to receive such information. As a holder of personal data, an unauthorized disclosure of wage reporting information may subject your LHA or Non-Profit to the payment of monetary damages. In addition, an unauthorized release of wage reporting information may subject your employees to a fine.

Each LHA and Non-Profit shall adopt its own set of guidelines for handling wage match information, which shall include, at a minimum, the following:

- (1) a list of employees who will be authorized to request and receive information provided through the Wage Match system
- (2) a written statement which sets forth the safeguards to ensure the protection of the privacy and confidentiality of the wage reporting information, including, but not limited to, access to computers, printed materials, and storing of information
- (3) procedures to ensure that the use of wage reporting information is only to verify the income and assets of households in the LHAs state housing programs
- (4) a statement that the LHA will notify DHCD immediately, both orally and in writing, if any wage reporting information is improperly used or accessed. The LHA will cooperate with DHCD to enjoin or prevent misuse of, regain possession of, and otherwise protect the data.

# **Procedures for Handling Cases of Income Discrepancy**

The information obtained from DOR is to be compared with income information reported by tenants for rent determination to see if there are any significant discrepancies. Significant in this case is defined as a difference between a household's income, based on information from DOR and that reported by the tenant or voucher holder, of ten percent or more. Cases of discrepancy will be identified in the manner described below.

## A. Identifying Cases of Income Discrepancy

The LHA or Non-Profit will compare income and asset information reported by members of a tenant household with wage reporting information provided by DOR. The LHA will use its best judgment to identify cases where there is a discrepancy of ten percent or greater. This ten percent figure triggers a rent re-determination under 760 CMR 6.00 and 760 CMR 49.00.

When the LHA or Non-Profit believes a tenant probably has income that exceeds this ten percent threshold, the LHA or Non-Profit will ask the tenant to explain the difference at meetings with housing authority or non-profit staff.

## **B.** Meetings/Hearing Process

The LHA or Non-Profit shall provide the tenant with an opportunity to explain the discrepancy.

- 1. The tenant will be requested in writing to attend a meeting at the housing agency. The letter must state the purpose of the meeting and contain the information from DOR that will be discussed. The letter will ask the tenant to call the housing agency to arrange for a mutually agreeable time.
- 2. If the tenant does not contact the LHA or Non-Profit, the housing agency will make a reasonable effort to set up the meeting. If no meeting has been arranged with the tenant after three weeks from the date of the notification letter, the housing agency will proceed to notify the tenant of his or her right to request a Grievance Hearing [See Step 5].
- 3. At the meeting, the housing agency director or his or her designee will discuss the information obtained from DOR concerning the tenant's wages and how it might affect the tenant's rent or voucher amount, or might be grounds for the tenant's eviction or termination.

The tenant will be given three weeks from the date of this meeting to provide income information, documentation, or other evidence that shows why the wage reporting information received from DOR is incorrect. The LHA or Non-Profit will evaluate all information provided by the tenant.

10/19/2016

- 4. The LHA or Non-Profit will then send a letter notifying the tenant of the action it will take, if any. If adverse action will be taken (i.e., increased rent, termination, or eviction), the housing agency will ask the tenant to attend an additional meeting. The letter will state clearly how the tenant is to schedule this meeting and the deadline for doing so. This meeting should be held within three weeks of the date of the letter. Any adverse action the LHA or Non-Profit plans to take shall commence following this meeting, if one is held, or at the end of the three-week period, if the tenant does not schedule or attend a meeting.
- 5. Tenants who feel aggrieved because of adverse action taken by an LHA or Non-Profit are entitled to a grievance hearing according to procedures outlined in 760 CMR 6.08 for state housing tenants and 760 CMR 49.10 for voucher holders (which refers to the process outlined in 760 CMR 6.08).

### **Reporting Adverse Actions to DHCD**

LHAs and Non-Profits must report to DHCD any adverse actions they take for each tenant, such as evictions or termination proceedings, rent increases, or rent repayment arrangements. These cases should be reported on the attached form. It is not necessary to report cases that are investigated but are cleared.

### **Executive Director/Board Approval**

Your signature below will indicate that you have read and thoroughly understand the contents of this notice. Please have the Executive Director, as well as the Chairman of your Board of Commissioners sign on the appropriate lines below, after Board approval, and forward a copy to your Housing Management Specialist. For more information about the wage match system, please call Bruce Siegel of the Bureau of Housing Management at (617) 573-1235.

Executive Director						
Chairman, Board of Commissioners						
Date						
	come/Asset/Tax Match Authnple Notice to Tenants	horization				
Income/Asset/Tax Match	n Authorization					
All adult members of the l	household must sign this for	m				
I have read the attached le	etter and authorize the use of	f my Social Security	number for the purp	oose described.		
Please return this form no	later than	If there are m	ore than four adults	in your household, ple	ease continue on the back	of this form.
Head of Household						
Social Security Number:						
Name (please print):						
Signature:						
Other adult (aged 18 and	d over) household member	·s				
1. Social Security Nun	mber:					
Name (please print):						
Signature:						
Social Security Nun	mber:					
Name (please print):						
Signature:						
3. Social Security Nun	mber:					
Name (please print):						
Signature:	-					
4. Social Security Nun	nber:					
Name (please print):						
Signature:						
5. Social Security Nu	ımber:		_			
Name (please print):						
Signature:						
6. Social Security Nu	ımber:		_			
Name (please print):						

Signature:

7. Social Security Number:	
Name (please print):	
Signature:	
9 Casial Casswitz Nyumban	
8. Social Security Number:	
Name (please print):	
Signature:	
Dear Massachusetts Public Housing Tenant Ho Dear Massachusetts Rental Voucher Participar	
Massachusetts Wage Reporting System. The I	dult household member (age 18 and over) residing in state-aided public housing is required to participate in the purpose is to verify the income of households. This will be done by matching the income and assets reported by each head of 8 and older) of each household with wages reported by employers to the Massachusetts Department of Revenue.
tenants to sign the release again to allow for the household eighteen years of age and older may submit an original release to the Authority. The agency to the state agency, the Department of forward this information to the Department of information reported by employers to the Department of information reported by employers.	provide your social security number (SSN). Many households signed such a release several years ago. We are asking all the most current information to be provided. This will update the release already on file so that all current members of the value included. New residents and those households who failed to comply during the last wage reporting match are asked to be SSNs and the names of the head of household and all adult members of the household will be forwarded by this housing Housing and Community Development (DHCD), which administers the state-aided public housing programs. DHCD will Revenue. The information you have reported to us concerning your income and assets will be matched with wage reporting partment of Revenue. The Department of Revenue will provide DHCD with information from its records as to your reported resoft your household, and DHCD will inform this housing agency of this information.
head of household. We will meet and work we cannot be resolved, and we determine that the current rent: seek repayment of rental underpart	Iformation provided to us by the household and the information provided by the Department of Revenue, we will contact the ith the head of household whose information is in question to try to resolve the ?mismatch? However, if the ?mismatch? household has incorrectly underreported wages, we may take one or more of the following actions: adjust the household's yments incorrectly made by the household, and/or terminate the household's tenancy. If we take any of these actions, the decision through this Agency's grievance procedures and in court.
	lved could also result in referral to DHCD. Information concerning you and your household may also be referred to the ppropriate law enforcement officials, which may result in further investigation, action, and/or criminal prosecution.
Before you sign this form, it is important that y	you know the following additional information:
	f the Acts of 1997, section 174; 760 CMR 6.05 (3)), it is mandatory that each head of household and adult household member al security number. Failure by a head of household or any adult (age 18 or over) household member to provide this Agency rmination of the household's tenancy.
2. We will use and hold your social security a described above unless we get your consent to	number and the information obtained from the Department of Revenue and DHCD in our records only for the purposes use it for any additional purposes.
	on confidential. Only employees of this Agency and the other agencies or entities described above may see this wage s for the purposes described above. These other agencies or offices will also keep the information confidential. If we receive one else, we will notify you.
4. If you ask, you or your authorized represer	ntative have a right to inspect and copy information collected about you.

6. You may object to the accuracy, completeness, pertinence, timeliness, relevance, use or dissemination of information we hold about you. If you object, we will investigate your objection and will either correct a problem or make your objection part of the file. If you are dissatisfied, we will further inform you of any additional opportunity for appeal.

5. If you ask, we will answer your questions about how we keep and use this information.

Sincerely,

LHA

Date

Attachment